

Press Release

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Rhode Island Expands Access to Life-Saving Hepatitis C Treatment

CRANSTON, RI (July 12, 2018) – The Executive Office of Health & Human Services (EOHHS) and advocates for patients with Hepatitis C (HCV) announced a change to the state's Medicaid policy that will increase access to life-saving treatment for people living with the virus. HCV, which is a bloodborne virus affecting the liver, is considered the deadliest communicable disease in the United States.

EOHHS and the Rhode Island Department of Health (RIDOH) worked with attorneys from Jones Kelleher, LLP, in conjunction with the Rhode Island Center for Justice, and the Center for Health Law and Policy Innovation of Harvard Law School and with other community partners to make this voluntary policy change. This occurred after the law firms notified Rhode Island officials on behalf of a Rhode Island Medicaid recipient who had been denied treatment for HCV that they were challenging the policy on her behalf and on behalf of other Medicaid patients. The new policy brings Rhode Island in line with federal medical necessity requirements for Medicaid.

"We continue to strengthen access to healthcare in Rhode Island," said Governor Gina M. Raimondo. "All Rhode Islanders living with this disease deserve treatment and an opportunity to live a full and rewarding life. I appreciate the Rhode Island Center for Justice and partners for working with us to improve access to care and treatment – and my team for taking swift action. We must remain vigilant and continue to work together to further our leadership, protect Rhode Islanders, and promote public health."

Rhode Island's new HCV policy, now in effect, removes previous Medicaid coverage restrictions for HCV treatment that permitted only those people with severe liver damage or cirrhosis to be covered. Under the new policy, any Medicaid beneficiary living with HCV and requiring treatment will be covered.

"This new policy goes to the heart of what Medicaid exists to do: ensure people, regardless of life circumstance, have the medical care and supports they need," said Medicaid Director Patrick Tigue. "Few policies have this type of direct, immediate impact on people's lives. I am thankful for the partnership that made this possible and the leadership our state continues to demonstrate in implementing responsible public health policies that put Rhode Islanders first."

"A comprehensive, public health approach of prevention and screening, that now includes treatment for all, is key to our goal of eliminating HCV in Rhode Island," said Director of Health Nicole Alexander-Scott, MD, MPH. "Public health, State institutions, clinical organizations, and community agencies need to all work together to address this epidemic and ensure that access to prevention and treatment does not depend on one's ZIP code, insurance status, or any other factors."

This expansion of access to treatment complements RIDOH's efforts to prevent hepatitis C transmission through the ENCORE needle exchange program, administered by AIDS Care Ocean State, which provides services annually to over 500 clients. In addition, RIDOH funds community-based agencies to conduct rapid hepatitis C testing and link people to care. RIDOH has recently established a relationship with the RI Health Center Association to facilitate improvements in hepatitis C screening, diagnosis, and treatment in Federally Qualified Health Centers that serve low-income patients.

"This policy change will directly improve the lives of many of our clients, some of Rhode Island's most vulnerable citizens," said Jennifer Wood, Executive Director of the Rhode Island Center for Justice. "We appreciate the Administration's partnership on this issue."

Michelle Giron, a Rhode Island Medicaid enrollee directly affected by the policy change, adds "The weight of the world has been lifted off my shoulders. Now, I'm excited about my future. I think that everyone else who's in my position feels the same way. It's like getting a new lease on life."

HCV is a communicable disease that causes chronic inflammation throughout the body and can lead to serious liver damage and infections, liver cancer, and death. At least 20,000 people in the United States die each year due to liver disease caused by HCV. Even before the advanced state of the disease, individuals with HCV can suffer from diabetes, lymphoma, fatigue, joint pain, depression, myalgias, arthritis and jaundice. In 2011, the United States Food and Drug Administration (FDA) began approving Direct Acting Antiviral drugs to treat HCV, and in 2014 the FDA approved new medications to effectively cure the disease. Many states have lagged behind providing Medicaid coverage in accordance with the standard of care. With this week's policy change, Rhode Island removed itself from that list.

"Rhode Island has taken an important step here," said Kevin Costello, Director of Litigation at the Center for Health Law and Policy Innovation of Harvard Law School. "This change is not only the right thing to do from a public health and legal point of view, but it also been proven that this policy will be cost-effective for the state in the long run. And it goes without saying that the real potential of this cure is the eradication of HCV altogether, a goal that is furthered by early treatment of Medicaid beneficiaries that makes, in their case, further transmission of the virus impossible."

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